

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875

Application or Docket Number

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

SMALL ENTITY

OR

OTHER THAN
SMALL ENTITY

FOR	NUMBER FILED	NUMBER EXTRA	RATE	FEE		RATE	FEE
BASIC FEE (37 CFR 1.10(a))				\$	OR		\$
TOTAL CLAIMS (37 CFR 1.10(c))	minus 20 *		X \$		OR	X \$	
INDEPENDENT CLAIMS (37 CFR 1.10(d))	minus 3 *		X \$		OR	X \$	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.10(d))			+	\$	OR	+	\$
TOTAL					OR	TOTAL	

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

SMALL ENTITY

OR

OTHER THAN
SMALL ENTITY

AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
	Total (37 CFR 1.102)	22	Minus	26		X \$ 25 *		OR	X \$ 50 *	
Independent (37 CFR 1.102)	3	Minus	5		X \$ 100 *		OR	X \$ 200 *		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.10(d))						+	\$	OR	+	\$
TOTAL								OR	TOTAL	
ADDITIONAL FEE								OR	ADDITIONAL FEE	

(Column 1) (Column 2) (Column 3)

RATE

ADDITIONAL
FEE

RATE

ADDITIONAL
FEE

AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
	Total (37 CFR 1.102)		Minus			X \$		OR	X \$	
Independent (37 CFR 1.102)		Minus			X \$		OR	X \$		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.10(d))						+	\$	OR	+	\$
TOTAL								OR	TOTAL	
ADDITIONAL FEE								OR	ADDITIONAL FEE	

(Column 1) (Column 2) (Column 3)

RATE

ADDITIONAL
FEE

RATE

ADDITIONAL
FEE

AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
	Total (37 CFR 1.102)		Minus			X \$		OR	X \$	
Independent (37 CFR 1.102)		Minus			X \$		OR	X \$		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.10(d))						+	\$	OR	+	\$
TOTAL								OR	TOTAL	
ADDITIONAL FEE								OR	ADDITIONAL FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20"

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3"

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1

This form is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO) and is a collection of information as defined by 35 U.S.C. 422 and 37 CFR 1.14. This collection is estimated to take 17 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

If you need assistance in completing this form, call 1-800-PTO-5199 and select option 1

BEST AVAILABLE COPY

10/60718
2/4/05
Shaw